

WISCONSIN
SENIORCARE

PO BOX 6710
MADISON WI 53716 0710

NOTICE OF DECISION
State of Wisconsin
Dept. of Health and Family Services

Date: 03/18/05
Name: Client A Name
Case Number: 123456789

Si requiere esta información en
español, llame al 1-800-657-2038

CLIENT A NAME
12345 MAIN STREET
MADISON WI 53555

We received your alien registration card and processed it to determine your SeniorCare eligibility. To complete our records we need to know your Country of Origin. We tried several times to contact you by telephone but could not get through to you. Please write your Country of Origin at the bottom of this notice and return it to the:

SENIORCARE PROGRAM
PO BOX 6710
MADISON WI 53716 - 0710

You can also call the SeniorCare Customer Service Hotline at 1-800-657-2038 to provide the information.

Thank You.

Cut along this line and return:

Name:
Case Number:
Your Country of Origin: